

FROM :

FAX NO. : 2486446530

Apr. 09 2001 09:31AM F2

PTC/SB/51 (02-01)

Approved for use through 01/31/2004 OMB 0651-0033

U.S. Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Docket Number (Optional)

## REISSUE APPLICATION DECLARATION BY THE INVENTOR

SCO-103

As a below named inventor, I hereby declare that:

My residence, mailing address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5,893,792 granted April 13, 1999, and for which a reissue patent is sought on the invention entitled METHOD FOR SHARPENINGBEDKNIVES

the specification of which

 is attached hereto. was filed on \_\_\_\_\_ at reissue application number \_\_\_\_\_ /  
and was amended on \_\_\_\_\_  
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verify believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

 by reason of a defective specification or drawing. by reason of the patentee claiming more or less than he had the right to claim in the patent. by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

The parent application 08/795,902, filed on February 5, 1997 was abandoned in favor of a continuing application filed on November 17, 1997 in order to present claims in a broader form. A Preliminary Amendment was filed cancelling the original claims in favor of the claims now claims 1-3 of U.S. patent 5,893,792. After issuance of the patent, applicant's attorney corresponded with an attorney for a possible licensee or infringer of this patent, and the patent claims were discussed in detail. At this time, applicant's attorney discovered that the word "fixed" in claim 1 had no antecedent basis in the specification, and this could render claim 1 indefinite. Applicant seeks to correct claim 1 by deleting the word "fixed", which will broaden claim 1.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments or suggestions as to how you use this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **NEVER SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.**

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## (REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)  
SCO-103

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.

Name(s) Registration Number

John R. Benefiel 24,889

Correspondence Address: Direct all communications about the application to:

Customer Number  Place Customer Number Bar Code Label here

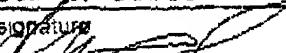
Type Customer Number here

<input checked="" type="checkbox"/> Firm or Individual Name	John R. Benefiel				
Address	280 Daines Street				
Address	Suite 100 B				
City	Birmingham	State	MI	Zip	48009
Country	USA				
Telephone	(248) 644-1455	Fax	(248) 644-6530		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

Keith M. Scott

Inventor's signature	Date
	4-09-0

Residence	Citizenship
Waterford, Michigan	US

Mailing Address
2466 Anders, Waterford, Michigan 48329

Full name of second joint inventor (given name, family name)

Inventor's signature	Date
----------------------	------

Residence	Citizenship
-----------	-------------

Mailing Address

Full name of third joint inventor (given name, family name)

Inventor's signature	Date
----------------------	------

Residence	Citizenship
-----------	-------------

Mailing Address

Additional joint inventors are named on separately numbered sheets attached hereto.